

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	09/889,911
	Filing Date	September 30, 2003
	First Named Inventor	Yi Zhang
	Title	UNIVERSAL INTERFACE FOR VOICE ACTIVATED ACCESS TO MULTIPLE INFORMATION PROVIDERS
	Art Unit	2626
	Examiner Name	Susan Iris McFadden
Attorney Docket Number		022395-006220US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

46670

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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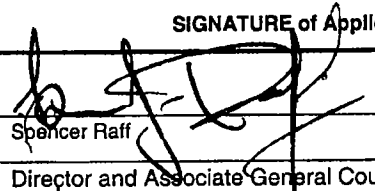
<input type="checkbox"/> Firm or Individual Name			
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City	State	Zip	
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Telephone	Email		

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Signature		Date	29 Oct 03
Name	Spencer Raff	Telephone	(650) 480-4925
Title and Company	Director and Associate General Counsel		

NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.